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U.S. APPLICATION NO. (if known, see 37CFR 1.53) <b>10/529265</b>		INTERNATIONAL APPLICATION NO. PCT/FR2003/002849		ATTORNEY'S DOCKET NUMBER 05725.1418	
21. <input checked="" type="checkbox"/> The following fees are submitted:				Applicant Use	Office Use Only
BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)):				\$300.00	
National Stage Search Fee.....				\$500.00	
National Stage Examination Fee.....				\$200.00	
ENTER APPROPRIATE BASIC FEE AMOUNT =				\$1000.00	
<input checked="" type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra Sheets	Number of additional 50 or fraction thereof (rounded up to a whole number)	Rate		
133- 100 =	33/50 =	1	x 250.00	\$250.00	
Surcharge of \$130.00 for furnishing the oath or declaration later than months from the earliest claimed priority date (37 CFR 1.492 (e)). <input type="checkbox"/> 20 <input type="checkbox"/> 30				\$	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total Claims	108	- 20 =	88	x \$50.00	\$4400.00
Independent Claims	3	- 3 =	0	x \$200.00	\$
<input checked="" type="checkbox"/> MULTIPLE DEPENDENT CLAIM(S) (if applicable)				+ \$360.00	\$ 360.00
TOTAL OF THE ABOVE CALCULATIONS =				\$6010.00	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.				\$	
SUBTOTAL =				\$6010.00	
Processing fee of \$130.00 for furnishing the English translation later than months from the earliest priority date (37 CFR 1.492(f)). <input type="checkbox"/> 20 <input type="checkbox"/> 30				\$	
TOTAL NATIONAL FEE =				\$ 6010.00	
Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property.				\$	
TOTAL FEES ENCLOSED =				\$ 6010.00	
				Amount to be refunded:	\$
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a. <input checked="" type="checkbox"/> A check in the amount of \$ <u>6010.00</u> to cover the above fees is enclosed. b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed. c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>06-0916</u> . A duplicate copy of this sheet is enclosed. d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the application to pending status.					
SEND ALL CORRESPONDENCE TO:					
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EFC/FPD/sci					
DATED: March 25, 2005					
				 SIGNATURE Ernest F. Chapman/25,961 NAME/REGISTRATION NO.	

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